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CONFIRMATION NO. 7413

SERIAL NUMBER	FILING OR 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/820,195	04/06/2004 RULE	604	3767	INSL-0110CP

APPLICANTS

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**** CONTINUING DATA ***************************

This application is a CIP of 09/943,992 08/31/2001 PAT 6,740,059 which claims benefit of 60/231,476 09/08/2000

**** FOREIGN APPLICATIONS *********************

NW
9/19/06

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **
06/18/2004

**** SMALL ENTITY ****

Foreign Priority claimed ☐ yes ☒ no 35 USC 119 (a-d) conditions met ☐ yes ☑ no ☐ Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials	STATE OR COUNTRY MA	SHEETS DRAWING 9	TOTAL CLAIMS 72	INDEPENDENT CLAIMS 1

ADDRESS
36310

TITLE

Data collection assembly for patient infusion system

FILING FEE RECEIVED		
918	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	☐ All Fees ☐ 1.16 Fees (Filing) ☐ 1.17 Fees (Processing Ext. of time) ☐ 1.18 Fees (Issue) ☐ Other _____ ☐ Credit